

Vermont Mental Health Performance Indicator Project

DDMHS, Weeks Building, 103 South Main Street, Waterbury, VT 05671-1601 (802-241-2638)

MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Group and Interested Parties

FROM: John Pandiani
Janet Bramley

DATE: September 21, 2001

RE: Consumer Evaluation of CRT Programs: FY2001

For updated results see: <http://www.state.vt.us/dmh/Data/PIPs/2002/pip021502.pdf>

The attached pages summarize the findings of the 2001 CRT Consumer Survey.

As you will see, the evaluations tend to be favorable, but there were differences among providers on a number of scales.

A more complete report of findings with detailed methodological specifications will be available within a few weeks. If you would like to receive a copy of the full report, please email to jpandiani@ddmhs.state.vt.us.

OVERVIEW AND SUMMARY OF RESULTS

CONSUMER EVALUATION OF COMMUNITY REHABILITATION AND TREATMENT PROGRAMS IN VERMONT: FY2001

During the Fall of 2000 and Winter of 2001, the Adult Mental Health Unit of the Vermont Department of Developmental and Mental Health Services asked consumers to evaluate the Community Rehabilitation and Treatment (CRT) Programs for adults with severe and persistent mental illness in Vermont's ten Community Mental Health Centers. All consumers who received services from these programs during January through June of 2000 were sent questionnaires that asked for their opinion of various aspects of these services. A total of 1,170 consumers (50% of deliverable surveys) returned completed questionnaires. The survey instrument was based on the MHSIP Consumer Survey developed by a multi-state work group and modified as a result of input from Vermont stakeholders (see Appendix II). The Vermont consumer survey was designed to provide information that would help stakeholders to compare the performance of CRT Programs in Vermont.

Methodology

In order to facilitate comparison of Vermont's ten CRT Programs, the consumers' responses to twenty-one fixed alternative items were combined into five scales, and their responses to four open ended questions were combined into four narrative scales. The fixed alternative item scales focus on *overall* consumer evaluation of program performance, and evaluation of program performance with regard to *access*, *service*, *respect*, and *autonomy*. The narrative scales include frequency of *positive* and *negative comments* about program performance. Positive comments are further broken down into *positive comments about staff* and *positive comments about service*. In order to provide an unbiased comparison across programs, survey results were statistically adjusted to remove the effect of dissimilarities among the client populations served by different community programs. Measures of statistical significance were also adjusted to account for the proportion of all potential subjects who responded to the survey.

Overall Results

The majority of consumers served by CRT Programs in Vermont rated their programs favorably. On our *overall* measure of program performance, 82% of the respondents evaluated the programs positively. Some aspects of program performance, however, were rated more favorably than other aspects. Fixed alternative items related to *service*, for instance, received more favorable responses (82% favorable) than items related to *autonomy* (78% favorable) or *respect* (77% favorable).

In total 85% of the consumers provided narrative comments: positive comments about program performance were offered by 72% of the consumers and negative comments about program performance by 45% of the consumers. Statewide, 35% of the consumers made positive comments specifically about staff and 39% made positive comments specifically about services.

Overview of Differences Among Programs

In order to compare consumers' evaluations of CRT Programs in the ten regional Community Mental Health Centers, scores on each of the nine composite scales were compared to the statewide average for each scale. The results of this survey indicate that there were significant differences in consumers' evaluations of some of the state's ten CRT Programs.

Consumer Evaluation of Community Rehabilitation and Treatment Programs: FY2001

Agency	Scales based on Fixed Alternative Items					Scales based on Narrative Comments			
	Overall	Access	Service	Respect	Autonomy	Positive	Negative	Pos. Services	Pos. Staff
Addison									
Northeast									
Orange									
Rutland									
Bennington									
Lamoille									
Washington									
Southeast									
Northwest									
Chittenden									
Key Better than average No difference Worse than average									

Access scale scores for four regions, Addison, Northeast, Orange and Rutland, were significantly above the statewide average. *Autonomy* scale scores for the Southeast, Northwest and Chittenden programs were significantly below the statewide average. The Chittenden program also received low scores on the *overall*, *service*, and *respect* scales. Consumer evaluations of Bennington, Lamoille and Washington, were not different from the statewide average on all five fixed alternative scales. For narrative scales, a higher than average proportion of consumers in Addison made *positive comments* about their program and a higher proportion of consumers in Bennington made *positive comments about services*. Rutland received lower scale scores on *positive comments* and *positive comments about services*; Orange received lower scale scores on *positive comments* and *positive comments about staff*. Fewer Bennington consumers than the statewide average made *positive comments about staff*. Scores for the Lamoille, Washington, Southeast, Northwest and Chittenden programs were not different from the statewide average on the narrative scales.